CEPTIFICATE OF MAILING

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10/B Barb 10/96

PATENT

Attorney Docket No. 13724-731 (formerly ZOMD 1039)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application)	PATENT APPLICATION
Inventor(s): Edward J. Gough, Alan A. Stein)	
Application No.: 08/515,379)	Group Art Unit: 3311
Filed: August 15, 1995) ,	Examiner: Peffley, M.
Title: MULTIPLE ANTENNA ABLATION APPARATUS)))	RECEIVED
AMEND	MENT	RECEIVED OCT 2 4 1996 GROUP 3300
Assistant Commissioner for Patents		- 100P 3800

Washington, D.C. 20231

(Signature of Person Mailing Paper or Fee)

Sir:

Responsive to the Official Action mailed September 10, 1996, please consider the following amendments and remarks.

AMENDMENT

In the Figures:

In Figure 9, kindly replace the reference numbers 42, 44, 46, 48, 50, 52 and 54 with reference numbers 30, 32, 34, 36, 38, 40 and 42, respectively.

In Figure 10, replace reference numbers 56, 58, 60, 62, 48 and 20 with reference numbers 44, 46, 48, 50, 36 and 20, respectively.

I hereby certify the successful ent postage	OF MAILING at this correspondence is being deposited with as first class mail in an envelope addressed to: on, D.C. 20231, on			
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**************************************	Atto	orney Docket	No. 13724-731 (formerly ZON	PATENT MD 1039)
\$ 1	IN THE UNITED STATES PAT	ENT AND T	TRADEMARK OFFICE	
In re Patent A	pplication of)	PATENT APPLICATION	
Gough	a, et al. 'e")	Group Art Unit: 3311	· .
Application N	08/515,379)	•	
Filed: Augus	et 15, 1995)	Examiner: Peffley, PECE	
	TIPLE ANTENNA ABLATION RATUS))	GCT 2	
	AMENDMENT TRA	ANSMITTA	L LETTER	
Assistant Cor Washington,	nmissioner for Patents D.C. 20231		· .	
Sir:				
Enclo	sed is an amendment in the above-	identified pa	tent application.	
[X]	1_ verified statement(s) claimin	g small entit	y status	
	[] are also enclosed [X] were su	ubmitted pre	viously	
[]	A Petition for Extension of Time	e is alsò encle	osed.	
[X]	No additional fee is required.			

Application No. 08/515,379 Attorney Docket No. 13724-731 Page No. 2

[] An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS								
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE			
Total Claims	44	MINUS 47 =	0	x \$22 =	0.00			
Independent Claims	2	MINUS 3 =	0	x \$80 =	0.00			
If Amendment adds mult	0.00							
Total Amendment Fee	0.00							
If small entity status is c	0.00							
TOTAL ADDITIONAL	0.00							

- [] A check in the amount of \$___ is enclosed.
- [] Charge \$___ to Deposit Account No. 23-2415.

The Commissioner is hereby authorized to charge any fees that may be required by this paper to Deposit Account No. 23-2415 (Docket No.13724-731). A duplicate of this paper is enclosed.

Respectfully submitted,

WILSON, SONSINI, GOODRICH & ROSATI

Paul Davis, Reg. No. 29,294

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